

**REPORT TO THE TWENTY-FOURTH LEGISLATURE  
STATE OF HAWAII  
2008**

**PURSUANT TO CHAPTER 321H-4,  
HAWAII REVISED STATUTES REQUIRING THE DEPARTMENT OF  
HEALTH TO PROVIDE AN ANNUAL REPORT ON THE ACTIVITIES UNDER  
THE NEUROTRAUMA SPECIAL FUND**

**PREPARED BY:**

**STATE OF HAWAII  
DEPARTMENT OF HEALTH  
December 2007**

## **EXECUTIVE SUMMARY**

In accordance with the provisions of Chapter 321H-4, the Department of Health is submitting an annual report on the activities of the neurotrauma special fund.

The neurotrauma special fund was established in 2002 by Act 160 for funding and contracting for services relating to neurotrauma. Funds are acquired through surcharges on traffic citations (speeding, drunk driving, not wearing seat belts, leaving the scene of an accident involving bodily injury) that are related to causes of neurotrauma injuries.

Effective January 1, 2003, surcharges from the specified traffic citations were deposited into the special fund. The Department of Health (DOH) has worked with neurotrauma survivors and their families to identify priorities for expenditure of monies in the special fund. The prioritized need is for assistance to access services and supports (support coordination). Procedures have been developed by the Judiciary and the DOH for transfer of monies into the neurotrauma special fund

The DOH has also established in compliance with Act 160, a Neurotrauma Advisory Board and an infrastructure “to develop, lead, administer, coordinate, monitor, evaluate, and set direction for a comprehensive system to support and provide services for survivors of neurotrauma injuries.” The Neurotrauma Advisory Board provides stakeholder input into the DOH’s neurotrauma activities and advisory recommendations regarding the special fund.

## **REPORT TO THE LEGISLATURE IN COMPLIANCE WITH CHAPTER 321H-4, H.R.S.**

An annual report on the neurotrauma special fund.

### **Introduction**

Act 160, signed into law on June 7, 2002, mandated the Department of Health (DOH) to “develop, lead, administer, coordinate, monitor, evaluate, and set direction for a comprehensive system to support and provide services for survivors of neurotrauma injuries.” The Act also required the DOH to establish a neurotrauma advisory board and administer a neurotrauma special fund. The neurotrauma special fund started to accumulate monies January 1, 2003. This report provides a status report on the fund activities for the period of October 2006 to September 2007.

### **Neurotrauma Advisory Board**

The Neurotrauma Advisory Board was established, per Act 160, to advise the DOH on the use of the neurotrauma special fund and development of a system of supports for persons with neurotrauma. The Board’s membership constitutes key stakeholder group representation on a statewide basis and has developed a strategic plan to carryout their functions. There are 4 working sub-committees – 1) Marketing; 2) Special Fund; 3) Legislative; and 4) Registry. The latter two are joint subcommittees with the State Traumatic Brain Injury Advisory Board. The members as a whole also address its last priority of sustaining a fully functioning and participatory Board during their respective strategic planning sessions annually. Current members of the Board are listed in Attachment I.

### **Use of the Neurotrauma Special Fund**

Chapter 321H-4, H.R.S. specifies that the neurotrauma special fund shall be used for the purpose of funding and contracting for services relating to neurotrauma as follows: (1) Education on neurotrauma, (2) Assistance to individuals and families to identify and obtain access to services (3) Creation of a registry of neurotrauma injuries within the State to identify incidence, prevalence, individual needs, and related information and (4) Necessary administrative expenses to carry out this chapter not to exceed two percent of the total amount collected.

Effective July 1, 2003, three DOH positions were funded by the neurotrauma fund to provide for coordination and support of a neurotrauma system of supports. Duties include planning and coordination of neurotrauma awareness/education activities, information and referral supports for individuals with neurotrauma and their families, individual coordination, eligibility determination, provision of access to support coordination services, support to the Neurotrauma and State Traumatic Brain Injury Advisory Boards, grant writing, needs assessment and quality improvement.

In addition, contracts and funding are provided for educational activities on neurotrauma.

(1) Educational activities:

DOH staff have engaged in numerous educational activities in the areas of, but not limited to: 1) staff development; 2) participation in conferences; 3) public exhibits; 4) outreach to neighbor islands; 5) dissemination of educational materials to board members and list serve; and 6) utilization of the neurotrauma special fund to procure education related activities.

One such example of the DOH's effort to utilize the neurotrauma special fund in the area of education is through a contract with the Brain Injury Association of Hawaii (BIA-HI). The BIA-HI, in collaboration with the State Neurotrauma Advisory Board (SNTAB) and the State Traumatic Brain Injury Advisory Board (STBIAB) is contracted to develop and implement educational and awareness activities and conduct a statewide needs assessment. Service activities shall include: plan and coordinate a Neurotrauma Conference in 2008; develop and oversee a Traumatic Brain Injury (TBI) Speakers Bureau; increase the number of professionals who are certified as Brain Injury Specialists; and conduct a statewide TBI Community Needs and Resources Assessment. The outcome of this partnership with the BIA-HI will yield valuable data to better understand the needs of individuals with TBI and their families, increase provider capacity better understand and serve individuals with TBI and promote education and awareness of TBI statewide.

DOH staff prioritized the need to reach out to the neighbor island communities and included board members in their activities. For example, two program staff did an outreach on Kauai in June '07 along with a member (from Kauai) of the STBIAB. They visited various community agencies and hospitals and provided neurotrauma materials: brochures, newsletters, referral forms, DVD "Life Goes On", and TBI discharge folders. DOH staff also met with a TBI survivor to discuss the possibility of starting a brain injury/stroke support group on the island. This survivor recommended several agencies that might be interested and program staff were able to visit these agencies and gauge their interest in the need for a support group.

In keeping up with the latest developments in services and supports for people with neurotrauma injuries, DOH staff have participated in a number of conferences, events and out service trainings on topics such as a teleconference on Brain Injury Screening Tools, on-line web cast on Innovative Approaches to Fall Prevention, and attended training on Social Security's "Outreach, Access and Recovery."

DOH staff will continue in their efforts to promote education and awareness activities through partnerships and collaborations with the respective advisory boards and community stakeholders statewide.

(2) Assistance to individuals and families to identify and obtain access to services activities:

- . Utilizing a definition of Support Coordination that has been endorsed by the Neurotrauma Advisory Board, the DOH has developed structural features of a service system which includes: eligibility, referral, service planning, service provision and monitoring.

This type of support would be considered part of a menu of neurotrauma services included in the Department of Human Services Quest Expanded Access 1115 Waiver amendment. A suggested menu of services that includes residential, rehabilitation, and long-term supportive services was developed by members of both Advisory Boards, interested stakeholders from mental health and other organizations and forwarded to DHS for consideration.

- . A project with the Pacific Basin Rehabilitation Research and Training Center (University of Hawaii – Manoa , John A. Burns School of Medicine) will be initiated in FY '08 to design, develop and implement a peer-mentoring project for individuals with TBI. The purpose of this project is to train mentors and have them assist persons with TBI to seek and utilize social services.
- . A DOH Neurotrauma Help Line was established to assist individuals and families to access information and services. The Help Line provides screening, intake and information and referral to assist individuals and their family members to access needed services in their communities. From October 2006 to September 2007 the Helpline received a total of 258 calls/emails (as compared to 209 in 2006) for an average of 22 a month. A total of 175 individuals (as compared to 145 in 2006) were served with 78 being first time callers.
- . The Neurotrauma Advisory Board has taken on the task of assisting the DOH in marketing the Neurotrauma Helpline. Its subcommittee on Marketing has produced a bus placard advertising the Helpline and is currently working on a flyer with the similar wording to be left at pharmacies, physicians' offices and churches. This flyer will also be translated into different languages for distribution. The subcommittee is also working on development of a neurotrauma resource guide.

(3) Development of a registry within the State to identify incidence, prevalence, needs, and related information of survivors of neurotrauma injuries:

- . Utilizing the past efforts of the State Neurotrauma and Traumatic Brain Injury Advisory Boards' joint registry subcommittee, the DOH is pursuing a project with the Hawaii Health Data Warehouse (HHDW) to create a neurotrauma registry within the Department's data warehouse. Critical elements of the registry have been developed and outlined. The HHDW has developed an online database which is now being tested as neurotrauma staff have begun transferring data from a previous database. Efforts to work with Department staff to determine the process by which protected health information may be obtained are continuing through on-going discussions with the Deputy Attorney General.
- . An in-house registry was initiated in July 2005 for all those clients involved with the program since its inception in June 2002. As of September 2007 there were 160 individuals in the registry, up from 108 last year for a 48% increase.
- . A project with the Queens Medical Center (QMC) will be implemented in FY '08. The purpose of this project is to assess outcomes following post-acute care for those individuals with severe TBI and to provide an avenue to link people with the DOH for follow up services and to identify community living service needs. With their consent, these individuals will be included in a database and entered into the registry.

### **Collection and Expenditure of Funds**

In FY 2007, a total of \$730,910 has been deposited into the fund from traffic surcharge collections. During that period of time, \$159,342 has been expended for positions. An additional \$53,295 has been used for educational activities for persons with neurotrauma. As of July 1, 2007, there was a balance of \$1,973,053 (excluding encumbrances) in the Neurotrauma Special Fund. A projected budget for the Neurotrauma Special Fund is provided in Attachment II. The budget reflects activities authorized under Chapter 321H-4, H.R.S.

## **Summary**

Given the Legislative intent of Act 160, the DOH is continuing its efforts to develop a neurotrauma system of supports to assist survivors of neurotrauma injuries and their families. The Neurotrauma, as well as the State Traumatic Brain Injury, Advisory Boards have progressed in their efforts to become an effective advisory body to the DOH.

During the coming year, the DOH will focus its efforts in assisting individuals with neurotrauma in accessing needed services through the Department of Human Services Quest Expanded Access 1115 Waiver program. In addition, neurotrauma staff will continue working with departmental data warehouse staff creating a neurotrauma registry. Neurotrauma staff will continue in their efforts, in consultation with the statewide advisory boards, to promote education/awareness of neurotrauma.

Attachment I

NEUROTRAUMA ADVISORY BOARD  
Chapter 321H-3, HRS

**VOTING MEMBERSHIP**

	<b>Term/representation</b>
Robin Argue Injury Prevention Coordinator Dept. of Health	At-Large
Joyce Arizumi	Spinal Cord Injury Support Group/Survivor
Lyna Burian	Traumatic Brain Injury Family Member
Joe Cordova, Administrator Vocational Rehabilitation and Services for the Blind Division Department of Human Services	At-Large
Angie Enoka	Brain Injury Assoc. Representative/Survivor
Elzadia Kaina	STBIAB Chairperson
Greg Keast Case Management Coordinator HMSA	Private Sector
Sally Jones Queen's Trauma Center Queen's Medical Center	Trauma Center
Ian Mattoch, Esq.	At-Large
Glenn Morgan	Spinal Cord Injury Survivor
Alan Parker Hawaii County Office of Aging	At-Large
Scott Sagum	Stroke Survivor
Karen Seth Manager, Neuroscience Institute Queen's Medical Center	Private
Lori Suan American Heart/Stroke Assn.	Stroke Association (Chair)
Milton Takara	Brain Injury Assoc. Representative/Survivor



Curtis Tom, DDS

Stella Wong  
Vice President-Programs  
Catholic Charities Elderly Services

Ann Yoshida

Stroke Survivor

At-Large

Spinal Cord Injury Group/  
Survivor

Attachment II

**Projected Revenue and Expenditures  
For the Neurotrauma Special Fund  
FY '08**

Balance as of 7/1/07	\$1,973,053
<u>Projected Expenditures for FY '08:</u>	
Salaries	\$211,185
Contracts	
1. Queen's Medical Center	\$27,000
2. University of Hawaii – Manoa	
a. Peer Mentoring Project	\$144,000
b. Fall Prevention Study	\$75,000
3. Brain Injury Association – Hawaii	\$116,000
4. Rehabilitation Hospital of the Pacific	\$150,000
Education/Awareness Activities	\$30,000
Administrative Expenses	
1. Travel (Neighbor Island, Out of State Conferences)	\$5,000
2. Materials and Supplies	\$5,000
Total Projected Expenditures	\$763,185
Projected Revenues for FY '08	\$730,000
Net	-\$33,185
Estimated Fund Balance as of 6/30/08	\$1,939,868